	e no		PART B	- FEE(S)	ΓRAI	NSMITTAL			45	
ļ	Complete and send t	or <u>F</u>	a <u>x</u>	Mail Stop ISSUE Commissioner fo P.O. Box 1450 Alexandria, Virg (703) 746-4000		4				
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		R GREIVE BOBAK T IDGE ROAD, SUITE		R & WEBER		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with th States Postal Service with sufficient postage for first class mail in an addressed to the Mail Stop ISSUE FEE address above, or being transmitted to the USPTO (703) 746-4000, on the date indicated below				
11/2	2/2004 MAHMED2 00000			Sandra C, Curatolo (Deposi						
						Sandra C. Curatolo				
	C:2501 C:1504				11-16-2004					
1	APPLICATION NO.	FILING DATE	FIRST NAMED INVEN			TOR	ATTORNEY DOCKET NO.		CONFIRMATION	
•	10/679,893	79,893 10/06/2003			Chao-Wei Lin			P24885	3819	
	TITLE OF INVENTION: SCREW-BELT ADVANCING MECHANISM FOR A SCREW DRIVING GUN									
į	APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE PI		JBLICATION FEE	TOTAL FEE(S) DUE		DATE DUE	
	nonprovisional	YES	\$685			\$300	\$985		01/18/2005	
	EXAMINER		ART UNIT		CI	ASS-SUBCLASS				
	ACKUN, JACOB K		3723			081-434000	•			
	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 Curatolo 2 Co., LPA					

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Please check the appropriate assignee category or categories (will not be	printed on the patent): Individual Corporation or other private group entity Gov						
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):						
Issue Fee Issue F	A check in the amount of the fee(s) is enclosed.						
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Advance Order - # of Copies	The Director is hereby authorized by charge the required fee(s), or credit any overpay Deposit Account Number 50-3275 (enclose an extra copy of this form).						
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The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified abo NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or othe interest as shown by the records of the United States Patent and Trademark Office.							
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